

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
MEDICAL ASSISTANCE ADMINISTRATION  
Olympia, Washington**

**To:** Pharmacists  
Managed Care Plans

**Memorandum No.:** 05-74 MAA  
**Issued:** August 1, 2005

**From:** Douglas Porter, Assistant Secretary  
Medical Assistance Administration

**For further information, go to:**  
<http://maa.dshs.wa.gov/pharmacy/>

**Subject: Prescription Drug Program: Maximum Allowable Cost Updates**

Effective for dates of service on and after September 1, 2005, the Medical Assistance Administration (MAA) will implement the following changes to the Prescription Drug Program:

- New additions to the Maximum Allowable Cost (MAC) list; and
- Adjustments to existing MACs.

**MAC Additions:**

Generic Name	Strength	Form	MAC Effective 09/01/05
CLARITHROMYCIN	250MG	TABLET	\$1.92920
HYDROMORPHONE HCL	4MG	TABLET	\$0.15410
HYDROMORPHONE HCL	8MG	TABLET	\$0.99440
INSULIN NPH HUMAN RECOM	300U/3ML	INSULIN PEN	\$4.22260
METHYLPREDNISOLONE	4MG	TAB DS PK	\$0.11000
OXYCODONE HCL	20MG/ML	ORAL CONC	\$0.63680
TRIMETHOBENZAMIDE HCL	300MG	CAPSULE	\$0.61690

**MAC Adjustments:**

Generic Name	Strength	Form	MAC Effective 09/01/05
LOPERAMIDE HCL	2MG	CAPSULE	\$0.08500
MUPIROCIN	2%	OINT (GM)	\$0.83040
TRIAMTERENE/ HYDROCHLOROTHIAZIDE	37.5/25MG	CAPSULE	\$0.06940
TRIAMTERENE/ HYDROCHLOROTHIAZIDE	37.5/25MG	TABLET	\$0.07000

## How can I get MAA's provider issuances?

To obtain DSHS/HRSA provider numbered memoranda and billing instruction, go to the DSHS/HRSA website at <http://hrsa.dshs.wa.gov> (click *the Billing Instructions and Numbered Memorandum* link). These may be downloaded and printed.